Re-Tooling the Congregate Nutrition Program

We are talking about re-defining and re-tooling our congregate meal programs. In doing so we are:

- Acknowledging that times have changed
- Funding has changed
- The people who we serve have changed
- The places where we serve have changed

Even more change is in store, and since it is inevitable we might as well decide that chance is good.

And it is!

Just think-thirty years ago people in their 60s and 70s needed us. For the most part they don't anymore.

Isn't that good?

Now we can free ourselves to concentrate on those who truly are at-risk.

As we refine and re-define the nutrition program we can also use this opportunity to remember the principles under which we started this program so many years ago:

- Reaching out to older people who are at risk for losing their self-sufficiency is at the very heart of our mission in the community.
- Simply identifying a need is not sufficient.
- It has been our central goal to serve all older people in the community, including those needing special assistance, to remain independent.
- The philosophy of a congregate meal site is that everyone has something unique to contribute. All participants can

- learn from differing lifestyles and skills, as well as how to cope with carious disabilities and problems.
- Healthier participants can gain insights to help them in future times of illness or need.

These maxims are the heart and soul of our congregate dining programs and they are the essence of community health. We meet our clients where they are, identify their goals, and walk with them to the highest levels of nutrition, health and wellness we can reach.

The challenges are growing, though, aren't they?

Our congregate clients today are older and more in need of special services than they were when the program was established. According to surveys and meal conferences I have attended in recent years, most congregate meal sites are experiencing a decline in attendance and difficulties attracting the newly-retired. The decline in attendance occurs when older users move away, die, or are too disabled to attend on a regular basis. In many cases, participants have not been replaced by new and younger seniors.

We need to adapt our programs or develop new ones to meet the growing needs of our current, older, participants as well as to attract new participants. There will be an increased need to accommodate more older people, especially the oldest old, people age 85 and older, in the coming century.

So how do we re-tool our congregate programs to retain and attract this market?

- 1. First of all, your staff must be excited my the prospect of change. Change can be threatening, but since it truly is inevitable, we must embrace it and find pleasure and excitement in becoming change agents. We must lead our staff to adapt and expand programs to reflect the changing needs and interests of an increasingly diverse older population.
- 2. Using an organized planning process can help insure that scarce resources and personnel are directed toward programs that respond to the changing needs of older people in the community. Program evaluations are not just exercises; they

are planning tools. What works? What doesn't work? We have to be willing to look critically at what we are doing now and ask ourselves the tough questions. What are we doing today just because we have always done it and what is truly meaningful to our clients?

- 3. As we design our new program to fit our new participants we need to build in the services required by each of the three markets. Jean has identified:
 - a) The well elderly with social need
 - b) The moderately impaired
 - c) The frail elderly
 - d) The baby boomer new seniors
- 4. But the wonderful thing about our new model is that we don't have to do it all by ourselves!
- 5. As the realtors have always said, "It's location, location, location." Congregate nutrition sites need to be community focal points, as they were originally defined by the Older Americans Act. The principle language in the 1978 Amendment defines a focal point as "a facility established to encourage the maximum collaboration and coordination of services for older individuals." At one time the church and senior center were the center of a community. But that is no longer the case. Now we need to find focal points that are in highly visibly places where anyone in a community concerned about aging can obtain information, services or a referral to another agency. By locating numerous services and agencies in one location, the focal point pools information and resources into one easily accessible location.

What does a community focal point look like?

It looks like a place where you would enjoy spending time:

- a) Light, bright décor and relaxing environment
- b) Openness
- c) Seating groups-tables, chairs with arms

- d) Game tables
- e) Fitness facility
- f) Area for reading, relaxing
- g) Access to:
 - Wellness center/Blood pressure screening
 - Foot care
 - Exercise
 - Health Education
 - Scheduled activities (ie. Farmers Market)
- h) Volunteer hosts/hostesses
- i) Program council Representatives
- j) Transportation:
 - More units of transportation, as seniors age driving and ability to drive decline.
 - At present Life Care is providing service for over 3,500 seniors in the community. Statistics show an increase of over 65% by 2015.

Life Care Alliance Talking Points

Slide 1:

• Intro

Slide 2:

- Meal program started with 25 meals per day to about 1000 per day.
- Now serve at 28 meal sites in Franklin and Madison County

Slide 3:

• Serve a variety of meals: Hot, Cold, Diet, Asian, Somali, Kosher, Mechanical Soft, and Pureed to meet all of our participants needs.

Slide 4:

- We refer participants to other agency services
- PACE (People with Arthritis Can Exercise) program at several dining locations
- Our centers offer Nutrition, education health and FUN!

Slide 5:

- We serve a variety of participants so you are bound to find a friend.
- Our coordinators and volunteers make people feel welcome

Slide 6:

- We work with a variety of community groups to offer our participants a variety of activities.
- Including Columbus Metro Parks, Columbus Parks and Recreation, Hilliard Happiness, Arbors, Scarlet O'Hara Group, Elder Focus, Family Drama

Slide 7:

• The congregate meals program is always looking to expand: We are now serving breakfast to a local senior community and are now serving seniors in Madison County. We will also be opening a convenience store for residence of Hilltop Center.